PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 DESCRIPTION OF DOCKER Number OF 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
T	OTAL CLAIMS		8					RATE	FEE	1	RATE	FEE	
FC	OR		NUMBER FILED		NUMBER EXTRA			BASIC FE	355.00	CR	BASIC FEE	710.00	
ĸ	TOTAL CHARGEABLE CLAIMS		8 minus 20=		6			X\$ 8=		OR	X\$18=		
INE	NDEPENDENT CLAIMS		4 _ minus 3 =					X40=			X80=		
M	MULTIPLE DEPENDENT CLAIM PRESENT							-2-70-7	-	OR		So.c	
* If the difference in column 1 is less than zero, enter *0" in column 2								+135=		OR	+270=		
1 1									L	OR	TOTAL	790.00	
	(Column 2) (Column 2)								ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAINS REMAINING AFTER AMENOMENT		HIGH NUM PREVK PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	. 9,	Minus	-2	9	•		X\$ 9=		OR	X\$18=		
Į	Independent	• 7	Minus	•••	<u>}-</u>	=		X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=		
		1					L	TOTAL		OR	101AL		
3	16/00	Dan					A	DOIT FEE		OR	ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								- 1					
AMENDMENT &		REMAINING AFTER AMENDMENT		PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
Ş	Total	. 11	Minus	/	0	2		X\$ 9=		OR	X\$18=		
¥	Independent	· O	Minus	** <	S	•		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+270=		
BEST AVAILABLE COPY									<u> </u>	OR	YOTAL		
I'	191-0	(Column 1)		(Colum		(Column 3)	~	DON, FEE		, (ADDIT, FEE		
6		CLAUMS REMAINING		HIGH	EST	PRESENT	ľ		ADDI-	1		ADDI-	
		AFTER AMENDMENT		PREVIO PAID	XUSLY	EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
AMENDMEN	Total	.10	Minus	. 2	0		F	X\$ 9=		OR-	-X\$18a	,	
3	Independent	. 6	Minus	,	3		丰	X40=	-	_	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	A000		
# # # # # # # # # # # # # # # # # # #											+270=		
	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number lound in the appropriate to												
	The "Highest Hus	ber Previously Pai	d For (Yoted or	Independe	int) is the	highest ramber	loun	d in the app	ropriste box	in cost.	#RIN 1,		

FORM PTO-015 (Rev. 800)

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